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FORM

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Total Number of Pages in This Submission

16

Application Number

10/016,945

Filing Date

12/14/2001

First Named Inventor

Grossman

Art Unit

2124

Examiner Name

Satish Rumpuria

Attorney Docket Number

DE920000087US1

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
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Floyd A. Gonzales

Date

Nov. 9, 2005

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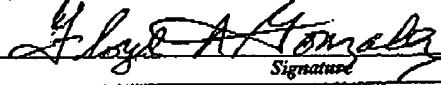
Floyd A. Gonzales

Date

Nov. 9, 2005

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. DE920000087US1	
Applicant(s): Grassman et al.					
Application No. 10/016,945	Filing Date 12/14/2001	Examiner Satish Rampuria	Customer No. 33558	Group Art Unit 2124	Confirmation No. 7397
Invention: CODE LOAD DISTRIBUTION					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21	21 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$0.00					
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p>					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <i>Floyd A. Gonzalez</i> <i>Signature</i>			Dated: Nov. 9, 2005		
Floyd A. Gonzalez IBM Intellectual Property Law 2455 Soupt Road - P386 Poughkeepsie, NY 12601			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)		
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DE920000087US1

10/016, 945

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IN THE U.S. PATENT & TRADEMARK OFFICE

AMENDMENT AFTER FINAL

Commissioner for Patents
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Siri

The final office action mailed 09/09/2005 having been received, enter the subject application as follows:

The Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.